

Background: This grant, as part of a larger “Improving Maternal and Infant Health Outcomes” initiative, seeks to collect and report on the developmental measure, “Use of Contraceptive Methods by Women Ages 21-44 Years.” CMS is looking for states to thoroughly test the reliability and validity of the measure produced by their existing data systems and develop recommendations and implement strategies to create the most valid measure reporting possible. As part of the grant, MassHealth will partner with the Massachusetts Department of Public Health.

Aim 1: The principal aim of the grant is to identify and implement the most reliable and valid method for collecting and reporting on the measure. We have identified four strategies to achieve Aim 1. The first strategy of the grant will be to understand the strengths and limitations of the MassHealth claims data, prepare and implement recommendations for improving the core data required for the measure.

The second strategy involves partnering with MDPH to understand the site-specific data collection process for three MDPH Title X clinics that are also MassHealth Family Planning sites. Participation from other Title X Family Planning sites in Massachusetts will also be sought. Using a structured questionnaire, we will conduct key informant interviews with MDPH partner (and other) sites to understand how information from the clinical encounter is stored in an EMR and then extracted for purposes of quality improvement and for billing. The goal of this strategy is to identify best practices in EMR documentation, data extraction and reporting and transfer lessons learned to MassHealth.

The third strategy involves calculating the measure using clinical data from MDPH sites and comparing the results to claims-based measure calculations for the same sites. Then, using quality improvement tactics such as the “five whys,” we will seek to understand the strengths and limitations of different data sources. The lessons learned will be applied to create the most reliable and valid method of calculating the Contraceptive Use measure.

The final strategy of Aim 1 will be to calculate and report the measure to CMS. For reporting in January of 2016, we will use existing processes and data to calculate the measure. For subsequent years of reporting strategies 1, 2 and 3 will be applied to understand and improve the raw data stream.

Aim 2: The second aim seeks to use the results of measurement for clinical quality improvement. Provider-level reports will be prepared for participating sites to identify both high performing and underperforming providers. We will then work collaboratively to identify root causes for performance issues. Finally, we will supply technical assistance such as benchmarking, facilitating and sharing best practices, provider training, supply chain management, or working with practices to embed clinical decision support tools in the electronic health record to help practices achieve their quality improvement goals.

Mr. Kenneth Spicer, Director of Primary Provider Networks at MassHealth will be leading the grant for MassHealth. The grant will fund a 0.5 FTE analyst for MassHealth to enhance data reporting for quality improvement. Other personnel from MassHealth, the UMMS Office of Clinical Affairs, and the Massachusetts Department of Public Health will supply clinical, measurement and quality improvement expertise.